

BIOLOGIC REGULATORY CONSULTING, INC.
agribusiness professionals

January 22, 2021

Document Processing Desk (GOLD SEAL)
Office of Pesticide Programs (7504P)
US Environmental Protection
Agency One Potomac Yard
2777 S. Crystal Drive
Room S-4900, 4th
Floor Arlington, VA
22202

Attention: Certificate of Registration Letter (Gold Seal Letter)
AlzChem Trostberg GmbH
"Dormex", EPA Reg. No. 54555-2

To whom it may concern,

On behalf of AlzChem Trostberg GmbH, we are requesting five (5) Certificate of Registration Letters (Gold Seal) for "Dormex", EPA Reg. No. 54555-2. The five countries are:

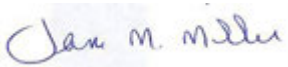
1. Egypt
2. Morocco
3. South Africa
4. Taiwan
5. Tunisia

The following documents are enclosed to process this action:

1. Application for Pesticide (EPA Form 8570-1)
3. PRIA Fee Receipt for M006 - \$291.00


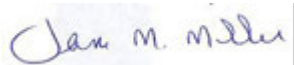
Should you have any questions please email me at jmiller@biologicconsulting.com or call our office at 239-331-3422. 203-740-1200.

Sincerely,



Jane Miller
Agent to AlzChem Trostberg GmbH

10529 Heritage Bay Blvd.
Naples, FL 34120
Tel: 239-331-3422
Email: jmiller@biologicconsulting.com

 United States Environmental Protection Agency 1200 Pennsylvania Avenue, N.W. Washington, DC 20460-0001		<input type="checkbox"/> Registration <input type="checkbox"/> Amendment <input checked="" type="checkbox"/> Other	OPP Identifier Number
Application for Pesticide – Section I			
1. Company/Product Number 54555-2		2. EPA Product Manager L. Roe	
4. Company/ Product (Name) Dormex		3. Proposed Classification X None <input type="checkbox"/> Restricted	
5. Name and Address of Applicant (Include ZIP Code) Alzchem Trostberg GmbH c/o Biologic Regulatory Consulting, Inc. 10529 Heritage Bay Blvd. Naples, FL 34120 <input type="checkbox"/> Check if this is a new address		6. Expedited Review. In accordance with FIFRA Section 3(c)(3)(b)(i) my product is similar or identical in composition and labeling to: EPA Reg. No. Product Name	
Section – II			
<input type="checkbox"/> Amendment – Explain below. <input type="checkbox"/> Resubmission in response to Agency letter dated _____ <input type="checkbox"/> Notification – Explain below.		<input type="checkbox"/> Final printed labels in response to Agency letter dated _____ <input type="checkbox"/> "Me Too" Application. <input type="checkbox"/> Other – Explain below.	
Explanation: Use additional page(s) if necessary. (For Section I and Section II.) Request for 5 Certificate of Registration Letters (Gold Seal) for the following countries – 1. Egypt 2. Morocco 3. South Africa 4. Taiwan 5. Tunisia			
Section – III			
1. Material This Product Will Be Packaged In:			
Child Resistant Packaging <input type="checkbox"/> Yes* <input type="checkbox"/> No	Unit Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No	Water Soluble Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No	2. Type of Container <input type="checkbox"/> Metal <input type="checkbox"/> Plastic <input type="checkbox"/> Glass <input type="checkbox"/> Paper <input type="checkbox"/> Other (Specify): _____
*Certification must be submitted		If "Yes" Unit Packaging Wt. No. Per Container	If "Yes" Packaging Wt. No. Per Container
3. Location of Net Contents Information <input type="checkbox"/> Label <input type="checkbox"/> Container		4. Size(s) Retail Container	
		5. Location of Label Directions <input type="checkbox"/> On Label <input type="checkbox"/> On Labeling Accompanying Product	
6. Manner in Which Label is Affixed to Product		<input type="checkbox"/> Lithograph <input type="checkbox"/> Stenciled <input type="checkbox"/> Paper glued <input type="checkbox"/> Other	
Section – IV			
1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application).			
Name Jane M. Miller		Title Agent	Telephone No. (Include Area Code) 239-331-3422
Certification			6. Date Application Received (Stamped)
I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.			
2. Signature 		3. Title Agent	
4. Typed Name Jane M. Miller		5. Date January 22, 2021	

Jane Miller

From: notification@pay.gov
Sent: Friday, January 22, 2021 10:37 AM
To: Jane Miller
Subject: Pay.gov Payment Confirmation: PRIA Service Fees



An official email of the United States government



Your payment has been submitted to the designated government agency through Pay.gov and the details are below. Please note that this is just a confirmation of transaction submission. To confirm that the payment processed as expected, you may refer to your bank statement on the scheduled payment date. If you have any questions or wish to cancel this payment, you will need to contact the agency you paid at your earliest convenience.

Application Name: PRIA Service Fees
Pay.gov Tracking ID: 26R1J9R0
Agency Tracking ID: 76069590410

Account Holder Name: Biologic Regulatory Consulting
Transaction Type: ACH Debit
Transaction Amount: \$291.00
Payment Date: 01/25/2021

Account Type: Business Checking
Routing Number: [REDACTED]
Account Number: *****3276

Transaction Date: 01/22/2021 10:37:04 AM EST
Total Payments Scheduled: 1
Frequency: OneTime

Registration Number: 54555-2
Company Name: Alzchem Trostberg GmbH
Company Number: 54555
Action Code: M006